

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF NEW YORK

Case number (if known)

Chapter 11

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Maha Laxmi II Corp.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 14-1832427

4. Debtor's address Principal place of business

17 Old Gick Road
Saratoga Springs, NY 12866

Number, Street, City, State & ZIP Code

Mailing address, if different from principal place of business

P.O. Box, Number, Street, City, State & ZIP Code

Saratoga
County

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor

Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
 Partnership (excluding LLP)
 Other. Specify: _____

Debtor

Maha Laxmi II Corp.

Name

7. Describe debtor's business

A. Check one:

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Railroad (as defined in 11 U.S.C. § 101(44))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 Clearing Bank (as defined in 11 U.S.C. § 781(3))
 None of the above

B. Check all that apply

Tax-exempt entity (as described in 26 U.S.C. §501)
 Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
 Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.

See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

Check one:

Chapter 7
 Chapter 9
 Chapter 11. Check all that apply:

The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
 The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, and it chooses to proceed under Subchapter V of Chapter 11. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
 A plan is being filed with this petition.
 Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
 The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
 The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years? No. Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? No Yes.

List all cases. If more than 1, attach a separate list

Debtor	See Attachment	Relationship	_____
District	_____	When	_____
			Case number, if known

Debtor Maha Laxmi II Corp.
Name _____ Case number (if known) _____

11. Why is the case filed in this district? Check all that apply:

Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

No
 Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

Other _____

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

No
 Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds Check one:

Funds will be available for distribution to unsecured creditors.
 After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

15. Estimated Assets

<input type="checkbox"/> \$0 - \$50,000	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

16. Estimated liabilities

<input type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
<input type="checkbox"/> \$50,001 - \$100,000	<input checked="" type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

Debtor

Maha Laxmi II Corp.

Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 11, 2021

MM / DD / YYYY

X /s/ Niral Patel

Signature of authorized representative of debtor

Niral Patel

Printed name

Title Secretary

18. Signature of attorney

X /s/ Justin A. Heller

Signature of attorney for debtor

Date January 11, 2021

MM / DD / YYYY

Justin A. Heller

Printed name

Nolan Heller Kauffman LLP

Firm name

**80 State Street, 11th Floor
Albany, NY 12207**

Number, Street, City, State & ZIP Code

Contact phone 518-449-3300

Email address jheller@nhklp.com

103632 NY

Bar number and State

Debtor

Maha Laxmi II Corp.

Name

Case number (*if known*) _____

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF NEW YORK

Case number (*if known*) _____

Chapter 11

Check if this an amended filing

FORM 201. VOLUNTARY PETITION

Pending Bankruptcy Cases Attachment

Debtor	Ambica M&J Two LLC	Relationship to you	Affiliate
District	Northern	When <u>1/11/21</u>	21-10014
Debtor	Jagdamba II Corp.	Relationship to you	Affiliate
District	Northern	When <u>1/11/21</u>	21-10015

Fill in this information to identify the case:

Debtor name Maha Laxmi II Corp.

United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) _____

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- Amended Schedule
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 11, 2021

X /s/ Niral Patel

Signature of individual signing on behalf of debtor

Niral Patel

Printed name

Secretary

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name	Maha Laxmi II Corp.
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF NEW YORK
Case number (if known):	_____

Check if this is an
amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
2904 Route 130 Delran NJ LLC 4280 Professional Center Drive Palm Beach Gardens, FL 33410			Unliquidated			\$0.00
Adirondack Trust Company 473 Broadway Saratoga Springs, NY 12866						\$110,300.00
Bank United 7765 NW 148th Street, Building 2 Miami Lakes, FL 33016						\$2,500,000.00
Choice Hotels International P.O. Box 99992 Chicago, IL 60696-7792						\$107,193.69
Culligan of Scotia 1 Culligan Drive Schenectady, NY 12302						\$3,047.58
HD Supply PO Box 509058 San Diego, CA 92150-9058						\$6,794.80
Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346						\$0.00
National Grid 300 Erie Blvd East Syracuse, NY 13202						\$45,120.40

Debtor **Maha Laxmi II Corp.**
Name _____

Case number (if known) _____

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
North Country Janitorial 188 Dix Avenue Glens Falls, NY 12801						\$1,007.43
NYS Department of Tax & Finance Bankruptcy Section P.O. Box 5300 Albany, NY 12205-0300						\$7,898.40
Peter Shabat 65 South Street Glens Falls, NY 12801		15-17 Old Gick Road Saratoga Springs, New York 12866		\$600,000.00	Unknown	Unknown
Saratoga County Treasurer 40 McMaster Street Ballston Spa, NY 12020						\$0.00
SDI Matto JV HoldCo LLC 2600 Douglas Road, Suite 901 Coral Gables, FL 33134		15-17 Old Gick Road Saratoga Springs, New York 12866		\$9,167,993.76	Unknown	Unknown
Spectrum P.O. Box 70872 Charlotte, NC 28272						\$15,833.15

Fill in this information to identify the case:

Debtor name Maha Laxmi II Corp.United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK

Case number (if known) _____

 Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Creditor's Name	Describe debtor's property that is subject to a lien	Column A Amount of claim	Column B Value of collateral that supports this claim
2.1 Peter Shabat <small>Creditor's Name</small> 65 South Street Glens Falls, NY 12801 <small>Creditor's mailing address</small>	15-17 Old Gick Road Saratoga Springs, New York 12866	\$600,000.00	Unknown
<p>Describe the lien</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)</p>			
<p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p> <p>1. SDI Matto JV HoldCo LLC 2. Peter Shabat</p>			
<p>As of the petition filing date, the claim is:</p> <p>Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			
2.2 SDI Matto JV HoldCo LLC <small>Creditor's Name</small> 2600 Douglas Road, Suite 901 Coral Gables, FL 33134 <small>Creditor's mailing address</small>	15-17 Old Gick Road Saratoga Springs, New York 12866	\$9,167,993.76	Unknown
<p>Describe the lien</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)</p>			
<p>Do multiple creditors have an interest in the same property?</p> <p>Check all that apply</p>			

Debtor Maha Laxmi II Corp.
Name _____

Case number (if known) _____

No Contingent
 Yes. Specify each creditor, Unliquidated
including this creditor and its relative Disputed priority.

Specified on line 2.1

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$9,767,993.7

6

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did
you enter the related creditor?

Last 4 digits of
account number for
this entity

Stuart F. Klein, Esq.
Bond Schoeneck & King
22 Corporate Woods Blvd, Suite 501
Albany, NY 12211

Line 2.2

Fill in this information to identify the case:

Debtor name **Maha Laxmi II Corp.**United States Bankruptcy Court for the: **NORTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

 Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

 No. Go to Part 2. Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.2	Priority creditor's name and mailing address NYS Department of Tax & Finance Bankruptcy Section P.O. Box 5300 Albany, NY 12205-0300	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$7,898.40 \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor	Maha Laxmi II Corp. Name	Case number (if known)	
3.1	Nonpriority creditor's name and mailing address 2904 Route 130 Delran NJ LLC 4280 Professional Center Drive Palm Beach Gardens, FL 33410 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
		Unknown	
3.2	Nonpriority creditor's name and mailing address Adirondack Trust Company 473 Broadway Saratoga Springs, NY 12866 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$110,300.00
3.3	Nonpriority creditor's name and mailing address Bank United 7765 NW 148th Street, Building 2 Miami Lakes, FL 33016 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500,000.00
3.4	Nonpriority creditor's name and mailing address Choice Hotels International P.O. Box 99992 Chicago, IL 60696-7792 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$107,193.69
3.5	Nonpriority creditor's name and mailing address Culligan of Scotia 1 Culligan Drive Schenectady, NY 12302 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,047.58
3.6	Nonpriority creditor's name and mailing address HD Supply PO Box 509058 San Diego, CA 92150-9058 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,794.80
3.7	Nonpriority creditor's name and mailing address National Grid 300 Erie Blvd East Syracuse, NY 13202 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,120.40

Debtor	Maha Laxmi II Corp. Name	Case number (if known)
3.8	Nonpriority creditor's name and mailing address North Country Janitorial 188 Dix Avenue Glens Falls, NY 12801 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Nonpriority creditor's name and mailing address Saratoga County Treasurer 40 McMaster Street Ballston Spa, NY 12020 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address Spectrum P.O. Box 70872 Charlotte, NC 28272 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1 Christopher E. Buckey, Esq. Cullen and Dykman LLP 80 State Street, Suite 900 Albany, NY 12207	Line <u>3.2</u> <input type="checkbox"/> Not listed. Explain _____	-
4.2 Jennifer L. Silvestro, Esq. Lazer, Aptheker, Rosella & Yedid, P.C. 225 Old Country Road Melville, NY 11747	Line <u>3.3</u> <input type="checkbox"/> Not listed. Explain _____	-

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	\$ <u>7,898.40</u>
5b. Total claims from Part 2	\$ <u>2,789,297.05</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	\$ <u>2,797,195.45</u>

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF NEW YORK**

In re Maha Laxmi II Corp.,

Debtor

Case No.

Chapter **11**

Social Security No(s). and all Employer's Tax Identification No(s). *[if any]*
14-1832427

CERTIFICATION OF MAILING MATRIX

I,(we), Justin A. Heller, the attorney for the debtor/petitioner (or, if appropriate, the debtor(s) or petitioner(s)) hereby certify under the penalties of perjury that the above/attached mailing matrix has been compared to and contains the names, addresses and zip codes of all persons and entities, as they appear on the schedules of liabilities/list of creditors/list of equity security holders, or any amendment thereto filed herewith.

Dated: January 11, 2021

/s/ Justin A. Heller

Justin A. Heller

Attorney for Debtor/Petitioner
(Debtor(s)/Petitioner(s))

2904 Route 130 Delran NJ LLC
4280 Professional Center Drive
Palm Beach Gardens, FL 33410

Adirondack Trust Company
473 Broadway
Saratoga Springs, NY 12866

Bank United
7765 NW 148th Street, Building 2
Miami Lakes, FL 33016

Choice Hotels International
P.O. Box 99992
Chicago, IL 60696-7792

Christopher E. Buckey, Esq.
Cullen and Dykman LLP
80 State Street, Suite 900
Albany, NY 12207

Culligan of Scotia
1 Culligan Drive
Schenectady, NY 12302

HD Supply
PO Box 509058
San Diego, CA 92150-9058

Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101-7346

Jennifer L. Silvestro, Esq.
Lazer, Aptheker, Rosella & Yedid, P.C.
225 Old Country Road
Melville, NY 11747

National Grid
300 Erie Blvd East
Syracuse, NY 13202

North Country Janitorial
188 Dix Avenue
Glens Falls, NY 12801

NYS Department of Tax & Finance
Bankruptcy Section
P.O. Box 5300
Albany, NY 12205-0300

Peter Shabat
65 South Street
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**United States Bankruptcy Court
Northern District of New York**

In re **Maha Laxmi II Corp.**

Debtor(s)

Case No.
Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Maha Laxmi II Corp. in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [Check if applicable]

January 11, 2021

Date

/s/ Justin A. Heller

Justin A. Heller

Signature of Attorney or Litigant
Counsel for **Maha Laxmi II Corp.**

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